

BEAR RIVER ASSOCIATION OF GOVERNMENTS
REVOLVING LOAN FUND
CHECK LIST

This checklist has been provided to assist you through the process of gathering the necessary information for the initial evaluation of your loan request. Complete information will be necessary to process your application. All forms provided herein unless noted.

- ____ 1. *Authorization to Release Information Form.*
- ____ 2. *Loan Request Form.*
- ____ 3. *Use of Loan Proceeds Form.*
- ____ 4. *Personal Financial Statement.* (Complete on all owners, partners, officers, directors, key employees, guarantors, and stockholders with 15% or more of the total stock issued:) all dated the same date, not over 45 days old. Additional forms available upon request. All financial statements must bear original signatures.
- ____ 5. *Personal Income Tax Return for the most recent year.* (Complete on all owners, partners, officers, directors, key employees, guarantors, and stockholders with 15% or more of the total stock issued:)
- ____ 6. *Personal History Forms.*
- ____ 7. *Management Resume(s) Form.* Provide complete resumes on all individuals referred to in #4 above. Additional forms available upon request.
- ____ 8. *History of Business Form.*
- ____ 9. *Schedule of Collateral.*
- ____ 10. *Business Debt Schedule.* This schedule must be dated the same as the Interim Financial Statement requested below and reflect all outstanding liabilities as shown on the interim financial statement.

IN ADDITION, PROVIDE THE FOLLOWING ITEMS:

- ____ 11. *Business Plan.*
- ____ 12. *Business Financials to Include:*
 - ____ a.) Financial Statement. Income statement, balance sheets, and tax returns for three prior year end time periods. All financial statements must bear original signatures.
 - ____ b.) Interim Financial Statement. Income statement and balance sheets dated no older than 45 days. All financial statements must bear original signature.
 - ____ c.) Monthly cash flow projection for a one (1) year period.
 - ____ d.) Profit and loss projections for three (3) years.
- ____ 13. *Corporations.* If borrower is a corporation, Corporate By-Lays and an approved Resolution for borrowing must be included.
- ____ 14. *Partnerships.* If borrower is a partnership, the Partnership Agreement and an approved resolution for borrowing must be included.
- ____ 15. *Lender Commitment Letters.*
- ____ 16. *Proforma Balance Sheet* (for start-up).
- ____ 17. *Job Creation by Year and Skill.*
- ____ 18. *At least two vendor quotes for equipment to be financed with loan proceeds.*
- ____ 19. *Construction Cost Estimates, Appraisals, and Real Estate Purchase Agreement* - if applicable.
- ____ 20. *List of Suppliers and Customers with contact persons and phone numbers.*

**Please be advised that all financial statements must have original signature and dates.
If any photocopies are made, please sign again and affix current date.*

AUTHORIZATION TO RELEASE INFORMATION AND DOCUMENTS

I/We, hereby authorize the release to Bear River Association of Government (BRAG) of any and all information they may require at any time for any purpose related to our credit transaction with them. I/We further authorize Bear River Association of Governments to release such information to any entity they deem necessary for any purpose related to our credit transaction with them.

I/We hereby certify that the enclosed information (plus any attachments or exhibits) is valid and correct to the best of my/our knowledge.

Signature_____

Date _____

Signature_____

Date _____

BEAR RIVER ASSOCIATION OF GOVERNMENTS

TERM LOAN REQUEST

APPLICANT COMPANY

Company Name: _____ Tax No: _____

Address _____ Telephone: _____ Email: _____

Business Type _____ Date Established: _____

Entity Type _____

Corporation ____ S Corp ____ Partnership ____ General ____ Limited ____ Proprietorship ____ Limited Liability Company _____

Number of employees at time of application: ____ Number of employees if loan is approved: _____

OWNERSHIP OF APPLICANT COMPANY

List below all officers, directors, partners, owners and co-owners and all stockholders with 15% or more of total stock issued.

NAME	TITLE	% OF OWNERSHIP	ANNUAL COMPENSATION
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

OTHER BUSINESS OWNED

All other businesses owned in whole or in part by applicant company and all other businesses owned in whole or in part by the owners of the applicant company.

COMPANY NAME	OWNER (Applicant company of individuals)	% OF OWNERSHIP
_____	_____	_____
_____	_____	_____
_____	_____	_____

BEAR RIVER ASSOCIATION OF GOVERNMENTS

USE OF PROCEEDS

ESTIMATED PROJECT COSTS

Land acquisition	\$ _____
New building construction	\$ _____
Building improvements or repairs	\$ _____
Acquisition of machinery/equipment	\$ _____
Inventory purchase	\$ _____
Working Capital (including accounts payable)	\$ _____
Acquisition of all or part of existing business	\$ _____
Payoff loan	\$ _____
Bank loan	\$ _____
Other debt payment	\$ _____
All other	\$ _____
 TOTAL ESTIMATED PROJECT AMOUNT	 \$ _____
MINUS OWN FUNDS TO BE USED IN PROJECT	\$ _____
MINUS OTHER FINANCING	\$ _____
 EQUALS TOTAL ESTIMATED LOAN REQUESTED FOR PROJECT	 \$ _____

BRAG FUNDS SHOULD NOT BE USED TO PAY-OFF EXISTING DEBT.

BEAR RIVER ASSOCIATION OF GOVERNMENTS
Personal Financial Statement

As of _____, 20____

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 15% or more interest and each general partner, or (3) each stockholders owning 20% or more of voting stock and each corporate officer and director, or (4) any other person or entity providing a guaranty on the loan.

Name	Business Phone ()
Residence Address	Residence Phone ()
City, State, & Zip Code	SS No.
Business Name of Applicant/Borrower	ID No.

ASSETS	LIABILITIES
Cash on hand & in banks \$ _____ Savings Accounts \$ _____ IRA or Other Retirement Accounts \$ _____ Accounts & Notes Receivable \$ _____ Stocks & Bonds \$ _____ Real Estate \$ _____ Automobile-Present Value \$ _____ Other Personal Property \$ _____ Other Assets \$ _____ <div style="text-align: right;">Total \$ _____</div>	Accounts Payable \$ _____ Notes Payable to Banks and Others \$ _____ Installment Account (Auto) \$ _____ Monthly Payments \$ _____ Installment Account (Other) \$ _____ Monthly Payments \$ _____ Loan on Life Insurance \$----- Mortgages on Real Estate \$ _____ Unpaid Taxes \$ _____ Other Liabilities \$ _____ Total Liabilities \$ _____ NET WORTH \$ _____ <div style="text-align: right;">Total \$ _____</div>

Section 1. Source of Income	Contingent Liabilities
Salary \$ _____ Net Investment Income \$ _____ Real Estate Income \$ _____ Other Income (Describe below) \$ _____	As Endorser or Co-Maker \$ _____ Legal Claims & Judgements \$ _____ Provision for Federal Income Tax \$ _____ Other Special Debt \$ _____

Description of Other Income in Section 1.

**Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income*

Section 2. Notes Payable to Banks and Others (Use attachments if necessary. Each attachment must be identified as a part of this statement & signed.)

Name & Address of Note holder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

BEAR RIVER ASSOCIATION OF GOVERNMENTS

Section 3. Other Stock and Bonds: Give listed and unlisted Stocks and Bonds *(Use separate sheet if necessary)*

No. of Shares	Names of Securities	Cost	Market Value	Statement Date
			Quotation	Amount

Section 4. Real Estate Owned. (List each parcel separately. Use supplemental sheets if necessary. Each sheet must be identified as a supplement to this statement and signed). (Also advise whether property is covered by title insurance, abstract of title, or both).

Title is in name of	Type of property
Name and Address of Holder of Mortgage (City and State)	Original Cost to (me) (us) \$ _____ Date Purchased _____ Present Market Value \$ _____ Tax Assessment Value \$ _____

Status of Mortgage, i.e., current or delinquent. If delinquent describe delinquencies

Section 5. Other Personal Property. *(Describe and if any is mortgaged, state name and address of mortgage holder and amount of mortgage, terms of payments and if delinquent, describe delinquency.)*

Section 6. Other Assets. *(Describe)*

Section 7. Unpaid Taxes. *(Describe in detail, as to type, to whom payable, when due, amount, and what, if any, property a tax lien, if any attached)*

Section 8. Other Liabilities. *(Describe in detail)*

(I) or (We) certify the above and the statements contained in the schedules herein is a true and accurate statement of (my) or (our) financial condition as of the date stated herein. This statement is given for the purpose of: *(Check one of the following)*

☐ Including BRAG to grant a loan as requested in application, of the individual or firm whose name appears herein, in connection with which this statement is submitted.

☐ Furnishing a statement of (my) or (our) financial condition, pursuant to the terms of the guaranty executed by (me) or (us) at the time BRAG granted a loan to the individual or firm, whose name appears herein.

Signature

Signature

Date

PERSONAL HISTORY

Please fill in all spaces, use first, middle and maiden names - no initials. If an item is not applicable, please indicate so. You may include additional information on a separate exhibit. Sign and date where indicated. This form must be completed by the following: the proprietor if a sole proprietorship; each partner if a partnership; each officer, director and 15% stock holder if a corporation; and any other person including a hired manager who has authority to speak for and commit the borrower in the management of the business.

NAME First Middle/Maiden Last SS No. _____

Date of Birth _____ Place of Birth _____

Resident Telephone (_____) _____ Business Phone (_____) _____

Residence Address _____
Street City State Zip

Previous Address _____
Street City State Zip

Lived there from _____ to _____
Month & Year Month & Year State (?)

Spouses's Name _____ SS No. _____
First Middle/Maiden Last

Military Service Background

Branch _____ From _____ To _____ Honorable Discharge _____

Are you employed by the U.S. Government? Yes ___ No ___ Agency/Position _____

Are you presently under the indictment, on parole or probation? Yes ___ No ___ If yes, please furnish details on separate exhibit.

Have you ever been charged with or arrested for any criminal offense other than a minor motor vehicle violation?

Yes ___ No ___ If yes, furnish details on a separate exhibit.

Have you ever been convicted of any criminal offense other than a minor motor vehicle violation? Yes ___ No ___ If yes, furnish details in a separate exhibit.

Have any of your officers of your company every been involved in bankruptcy or insolvency proceedings? Yes ___ No ___ If yes, furnish details in a separate exhibit.

Are any of your business involved in any pending lawsuits? Yes ___ No ___ If yes, furnish details in a separate exhibit.

Signature _____ Date _____

BEAR RIVER ASSOCIATION OF GOVERNMENTS

MANAGEMENT RESUME

Please include EDUCATION background, WORK EXPERIENCE (listed chronologically, beginning with present employment), and MANAGEMENT EXPERIENCE if any, along with major personal accomplishments. This form must be filled out and submitted by the proprietor if a sole proprietorship; each partner of a partnership; each officer, director, and additionally by each holder of 15% or more of the voting stock if a corporation; or any other person, including a hired manager, who has authority to speak for and commit the borrower in the management of business.

Signature_____ Date _____

BEAR RIVER ASSOCIATION OF GOVERNMENTS

HISTORY OF BUSINESS

Please include DATE BUSINESS ESTABLISHED, NATURE OF THE BUSINESS, TYPES OF PRODUCTS AND SERVICES, CUSTOMER PROFILE, KEY CUSTOMERS, MAJOR COMPETITORS, MAJOR PAST ACCOMPLISHMENTS, FUTURE PLANS FOR GROWTH/EXPANSION, and HOW THIS LOAN WILL BENEFIT YOUR COMPANY.

Signature _____	Date _____
Signature _____	Date _____

BEAR RIVER ASSOCIATION OF GOVERNMENTS

SCHEDULE OF COLLATERAL

Applicant

Street Address

City

State

Zip

LIST ALL COLLATERAL TO BE USED AS SECURITY FOR THIS LOAN

Section II - REAL ESTATE

Attach a copy of the deed(s) containing a full legal description of the land and show the location (street address) and city where the deed(s) is recorded. Following the address below, give a brief description of the improvements, such as size, type of construction, use, number of stories, and present condition (use additional sheet if more space is required).

LIST PARCELS OF REAL ESTATE					
Address	Year Acquired	Original Cost	Market Value	Amount of Lien	Number of Lienholder

Section II - PERSONAL PROPERTY

All items listed herein must show manufacture or make, model, year, and serial number. Items with no serial number must be clearly identified (use additional sheet if more space is required).

Description - Show Manufacture, Model, and Serial No.	Year Acquired	Original Cost	Market Value	Current Lien Balance	Name of Lienholder

All information contained herein is TRUE and CORRECT to the best of my knowledge, I understand that FALSE statements may result in forfeiture of benefits and possible fine and prosecution.

Signature _____ Date _____

Signature _____ Date _____

BEAR RIVER ASSOCIATION OF GOVERNMENTS

BUSINESS DEBT SCHEDULE

COMPANY NAME: _____ DATE: _____

(Same as interim financial statement)

This schedule should contain loans for contracts and notes payable, **not** accounts payable or accrued liabilities.

Creditor Name/Address	Original Date	Original Amount	Present Balance	Monthly Payment	Interest Rate	Maturity Date	Collateral/ Security
TOTAL PRESENT BALANCE*							

*Total must agree with balance shown on interim balance sheet. Signature _____

Date _____

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